

Children's Health Insurance Program

Healthy and Well Kids in Iowa (*hawk-i*) and *hawk-i* Dental-Only Plan



Purpose

The Children's Health Insurance Program (CHIP) provides health care coverage for children and families whose income is too high to qualify for Medicaid but too low to afford individual or work-provided health care. The purpose of CHIP is to increase the number of children with health and dental care coverage, thereby improving their health and dental outcomes.

Medicaid Modernization is a major initiative in which the Iowa Department of Human Services (DHS) will enroll the majority of the Children's Health Insurance Plan (CHIP) and Healthy and Well Kids in Iowa (*hawk-i*) members in managed care organizations (MCOs). DHS will contract with MCOs to provide comprehensive health care services including physical health, behavioral health and long term supports and services. This initiative creates a single system of care to promote the delivery of efficient, coordinated and high quality health care and establishes accountability in health care coordination. IA Health Link is the name and brand for the new managed care program.

Who Is Helped

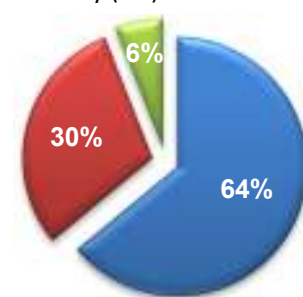
Enrollment in Iowa's CHIP program has been instrumental in providing coverage to thousands of uninsured children since 1998, and Iowa has historically been among the states with the lowest uninsured rate among children.

CHIP has three parts: a Medicaid expansion, a separate program called Healthy and Well Kids in Iowa (*hawk-i*), and a dental-only plan.

- **Medicaid expansion** provides coverage to children ages 6-18 whose family income is between 122 and 167 percent of the Federal Poverty Level (FPL), and infants whose family income is between 240 and 375 percent of the FPL.
- The *hawk-i* program provides coverage to children under age 19 in families whose gross income is less than or equal to 302 percent of the FPL based on Modified Adjusted Gross Income (MAGI) methodology.
- Total CHIP enrollment decreased by 2.8 percent (1,655 enrollees) in SFY15, and is expected to increase by 3.4 percent (2,052 enrollees) in SFY16; enrollment is projected to increase by 3.3 percent (2,052 enrollees) in SFY17. Projected increases are based on historical enrollment.

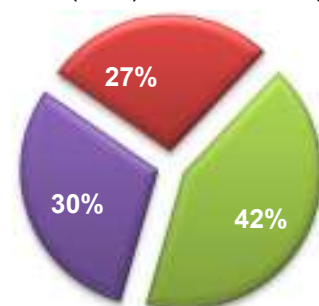
CHIP Members SFY15

■ *hawk-i* (64%) ■ Expansion (30%)
■ Dental Only (6%)

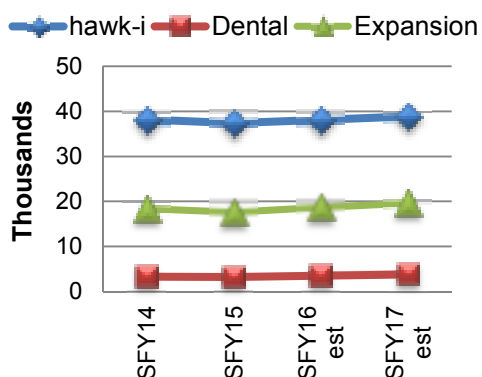


Age of CHIP Children on June 30, 2015

■ 0-1 (0%) ■ 1 to 5 (27%)
■ 6 to 12 (42%) ■ 13 to 18 (30%)



CHIP Enrollment



Services

- ✓ As of June 30, 2015, 17,578 children were covered in the Medicaid expansion program, 37,440 in **hawk-i**, and 3,209 in the dental-only plan.
- ✓ Enrollment in the CHIP program decreased to 58,227 children in SFY15, but is expected to increase to 60,279 in SFY16; and 62,331 children in SFY17.
- ✓ A comprehensive outreach campaign includes producing publications, free-and-reduced lunch mailings, statewide grassroots outreach, and by giving presentations to various groups who can assist with enrolling uninsured children in the **hawk-i** program.

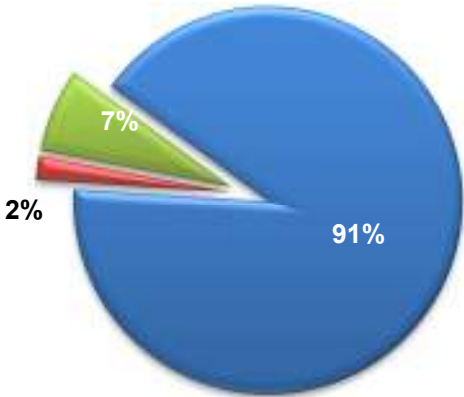
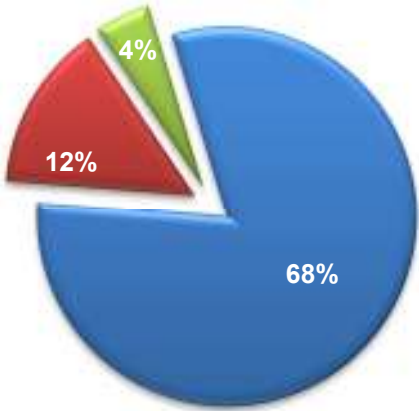
The CHIP program is administered under Title XXI of the Social Security Act and covers a comprehensive range of health and dental services for Iowa's children who meet the program's eligibility criteria.

Beginning January 1, 2016, members with CHIP Program will have their services administered through a managed care entity.

Key components of the CHIP program are:

- Children covered by the Medicaid expansion receive covered services through existing Medicaid provider networks. This activity receives enhanced federal funding through Title XXI, rather than Title XIX.
- For the first half of SFY16, **hawk-i** health and dental coverage is provided through contracts with Wellmark Health Plan of Iowa, United Healthcare Plan of the River Valley, and Delta Dental of Iowa.
- **hawk-i** services include, but are not limited to, doctor visits, inpatient and outpatient hospital, well-child visits, immunizations, emergency care, prescription medicines, eye glasses and vision exams, dental care and exams, speech and physical therapy, ambulance, and mental health and substance abuse care.
- The **hawk-i** program pays premiums to plans.
- Required dental coverage includes diagnostic and preventive services, routine and restorative services, endodontic and periodontal services, cast restorations, prosthetics and medically necessary orthodontia.

- ✓ Iowa is one of only a limited number of states with CMS-approved plans which include basic dental coverage and medically necessary orthodontic coverage.
- ✓ The covered services under **hawk-i** are different from regular Medicaid and are approximately equivalent to the benefit package of the state's largest Health Management Organization (HMO) at the time the program was initiated.

<p>Goals & Strategies</p>	<p>Under IA Health Link, DHS will enroll the majority of the CHIP and <i>hawk-i</i> members in managed care organizations (MCOs). This initiative is designed to create a single system of care to address health care needs of the whole person. This includes physical health, behavioral health, and long term care services and supports. Primary goals of the initiative include:</p> <ul style="list-style-type: none"> • Improved quality and access • Greater accountability for outcomes • Greater stability and predictability in the CHIP and <i>hawk-i</i> budget <p style="text-align: center;">2015 Satisfaction Survey Is the Premium Affordable?</p> <p>■ Yes (91%) ■ No (2%) ■ Not Answered (7%)</p> 	<p style="text-align: center;">SFY15 Satisfaction With Care</p> <p>■ Very Satisfied (68%) ■ Satisfied (12%) ■ Neutral (4%) ■ Unsatisfied (0%) ■ Extremely Unsatisfied (0%)</p> 
<p>Legal Basis</p>	<p>Federal:</p> <ul style="list-style-type: none"> • Title XXI of the Federal Social Security Act. The Affordable Health Care Act (ACA), signed into law on March 23, 2010, continues CHIP programs through September 30, 2019. The ACA prohibits states from reducing their current eligibility standards until this date. Under CHIPRA, funding for the program is authorized through September 30, 2017. <p>State:</p> <ul style="list-style-type: none"> • Chapter 514I of the Code of Iowa; 441 IAC Chapter 86 	